## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000119937

Entity Name: ST. JOHNS AVENUE, INC.

FILED Apr 29, 2010 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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4595 LEXINGTON AVE JACKSONVILLE, FL 32210

Current Mailing Address: New Mailing Address:

4595 LEXINGTON AVE JACKSONVILLE, FL 32210

FEI Number: 74-3071271 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WELLS, MARIE 4595 LEXINGTON AVE JACKSONVILLE, FL 32210 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

III the State of Florida

SIGNATURE: Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

 Name:
 WELLS, MARIE

 Address:
 4595 LEXINGTON AVE

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title:

 Name:
 CHASE, MARY S

 Address:
 45954 LEXINGTON AVE

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: D

Name: CHASE, IAN

Address: 45954 LEXINGTON AVE City-St-Zip: JACKSONVILLE, FL 32210

Title: [

 Name:
 EVANS, MARY K

 Address:
 45954 LEXINGTON AVE

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: [

 Name:
 MILNE, DOUGLAS J

 Address:
 45954 LEXINGTON AVE

 City-St-Zip:
 JACKSONVILLE, FL 32210

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DOUGLAS J. MILNE D 04/29/2010